



# BOARD

# BRIEFS

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## PHARMACOTHERAPY FOR WEIGHT LOSS

During 1996 there was a renewed interest in pharmacotherapy for weight loss. The feature article of the September 23, 1996 issue of *Time* was on the FDA approved drug Redux. For the past two years, the Virginia Board of Medicine has been in the process of promulgating an amendment to General Regulation 18 VAC 85-20-90 regarding pharmacotherapy for weight loss. Many physicians, pharmacists, and patients felt that Part B of this regulation was too uncertain. This regulation stated:

"It shall be unprofessional conduct for a physician to prescribe amphetamine-like drugs, schedules III and IV, for the purpose of weight reduction or control in the treatment of obesity, except as a *short-term* adjunct to a therapeutic regimen of weight reduction." (emphasis added)

Specifically, the absence of a definition of "short term" was a stumbling block to consistent and precise interpretation and application of the regulation. Therefore, the Board of Medicine promulgated new regulations which became effective December 25, 1996. These new regulations had a great deal of input from the public, the American Society of Bariatric Physicians, and other professionals, especially Denise Bruner, M.D., an internist who specializes in nutrition and obesity. The new regulation is reprinted below:

### 18 VAC 85-20-90. Pharmacotherapy for weight loss.

- A. It shall be unprofessional conduct for a physician to prescribe amphetamine, schedule II, for the purpose of weight reduction or control.
- B. It shall be unprofessional conduct for a physician to prescribe anorectic drugs, schedules III through VI, for the purpose of weight reduction or control in the treatment of obesity, unless the following conditions are met:
  1. A comprehensive history, physical examination, and interpreted electrocardiogram are performed and recorded at the time of initiation of treatment for obesity by the prescribing physician;
  2. A diet and exercise program for weight loss is prescribed and recorded;
  3. The patient is weighed at least once a month, at which time a recording shall be made of blood pressure, pulse, and any other tests as may be necessary for monitoring potential adverse effects of drug therapy;
  4. No more than a thirty day supply of such drugs shall be prescribed or dispensed at any one time;
  5. No such drugs shall be prescribed or dispensed for more than ninety days unless the patient:
    - a. Has a recorded weight loss of at least twelve pounds in the first ninety days of therapy;
    - b. Has continued progress toward achieving or maintaining a target weight; and
    - c. Has no significant adverse effects from the prescribed program. (Amended - Effective December 25, 1996, by revising subsection B and adding §1-5)